DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10003807-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a

patent is sought on the DEFECTIVE PIXEL COR	RECTION	METHOD A	ND SYSTE	M	
the specification of whi	ich is att	ached hereto	unless the	e following box is ch	necked:
Number	and w	as amended	on	(if a	CT International Application pplicable).
	s amend	ed by any a	mendment	(s) referred to abov	above-identified specification, e. I acknowledge the duty to FR 1.56.
Foreign Application(s) and/or		-	United State	o Codo Santian 110 of	any foreign application(s) for patent or
inventor(s) certificate listed be a filing date before that of the	elow and l	have also identi	fied below ar	ny foreign application for	patent or inventor(s) certificate having
COUNTRY		APPLICATION N	IUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S.C. 119
N/A					YES: NO-
					YES: NO:
Provisional Application I hereby claim the benefit ur	nder Title 3	35, United State	es Code Sect	ion 119(e) of any United	States provisional application(s) listed
below:					
Markon Company	APPL	ICATION SERIAL NU	MBER	FILING DATE	
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(Use Page Two For Additional Inventor(s) Signature(s))

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